

BEFORE THE DEPARTMENT OF PUBLIC  
HEALTH AND HUMAN SERVICES OF THE  
STATE OF MONTANA

In the matter of the adoption of New ) NOTICE OF ADOPTION,  
Rules I through VII, amendment of ) AMENDMENT, AND REPEAL  
ARM 37.86.2206, 37.86.2207, )  
37.87.702, 37.87.703, 37.87.901, and )  
37.87.903, and repeal of ARM )  
37.86.2219 and 37.86.2221 )  
pertaining to provider requirements )  
and reimbursement for therapeutic )  
group homes (TGH), therapeutic )  
family care (TFC), and therapeutic )  
foster care (TFOC) )

TO: All Concerned Persons

1. On September 23, 2010, the Department of Public Health and Human Services published MAR Notice No. 37-518 pertaining to the public hearing on the proposed adoption, amendment, and repeal of the above-stated rules at page 2085 of the 2010 Montana Administrative Register, Issue Number 18.

2. The department has adopted New Rule I (37.87.1011), III (37.87.1015), IV (37.87.1017), V (37.87.1021), VI (37.87.1023), and VII (37.87.1025) as proposed.

3. The department has amended ARM 37.86.2207 and repealed ARM 37.86.2219 and 37.86.2221 as proposed.

4. The department has adopted the following rule as proposed with the following changes from the original proposal. Matter to be added is underlined. Matter to be deleted is interlined.

NEW RULE II (ARM 37.87.1013) THERAPEUTIC GROUP HOME (TGH), REIMBURSEMENT (1) through (1)(b) remain as proposed.

(2) ~~The therapeutic and rehabilitative portion of TGH services are therapeutic services provided by the lead clinical staff (LCS) and the program manager (PM) are "therapy" and "therapeutic intervention" defined as follows:~~

(a) ~~"Therapeutic services Therapy"~~ means the provision of psychotherapy and rehabilitative remedial services provided by the ~~lead clinical staff~~ LCS acting within the scope of the professional's license or same services provided by an in-training mental health professional in a TGH. ~~The purpose of these services is for maximum reduction of mental disability and restoration of a youth's best possible functional level, to alleviate the emotional disturbances, reverse or change maladaptive patterns of behavior and encourage personal growth and development.~~ A These services include a combination of supportive interactions, cognitive therapy, interactive psychotherapy, and behavior modification techniques which are used to

youth with serious emotional disturbance (SED) who are at risk of out of home or residential placement, or risk removal from current setting for youth under six years of age. CBPRS services are provided for a short period of time, generally 90 days or less, to improve or restore the youth's functioning in one or more of the spheres impaired areas identified in the SED definition in ARM 37.87.303. Services are provided by trained mental health personnel under the supervision of a licensed mental health professional and according to a rehabilitation plan goals.

(2) through (11) remain as proposed.

AUTH: 53-2-201, 53-6-101, 53-6-113, MCA

IMP: 53-2-201, 53-6-101, 53-6-111, MCA

37.87.703 MENTAL HEALTH CENTER SERVICES FOR YOUTH WITH SERIOUS EMOTIONAL DISTURBANCE (SED), COVERED SERVICES (1) Mental health center services for youth with serious emotional disturbance include:

(a) Community-based psychiatric rehabilitation and support (CBPRS) services:

(i) are provided on a face-to-face basis primarily with a youth, and may also include consultation ~~services provided~~ on a face-to-face basis with family members, teachers, employers, or other key individuals in the youth's life when such contacts are clearly necessary to meet rehabilitation goals established in the youth's individual ~~rehabilitation~~ treatment plan;

(ii) through (iii) remain as proposed.

(iv) do not require prior authorization when provided on the same day as CSCT, Day Tx, or partial hospital services, if CBPRS is provided before or after program hours. This includes both individual and group CBPRS. Documentation of CBPRS must include time in and time out to show that CBPRS was not provided during program hours;

(v) are not allowed when the service to be provided is:

(A) through (D) remain as proposed.

(E) in a ~~shelter care facility~~, therapeutic group home, hospital, psychiatric residential treatment facility, or other residential facilities;

(F) through (g)(i)(B) remain as proposed.

AUTH: 53-2-201, 53-6-101, 53-6-113, MCA

IMP: 53-2-201, 53-6-101, 53-6-111, MCA

37.87.901 MEDICAID MENTAL HEALTH SERVICES FOR YOUTH, REIMBURSEMENT (1) Medicaid reimbursement for mental health services shall be the lowest of:

(a) remains as proposed.

(b) the rate established in the department's fee schedule. The department adopts and incorporates by reference the department's Medicaid Mental Health and Mental Health Services Plan, Individuals Under 18 Years of Age Fee Schedule dated November 1, 2010 January 15, 2011. A copy of the fee schedule may be obtained from the Department of Public Health and Human Services, Developmental

Eliminating this requirement would streamline the process and save the provider the time it takes to prepare and submit the CON.

RESPONSE #32: The department disagrees. A CON is necessary for both moderate and permanency TFOC levels because a youth discharging from permanency level TFOC may not meet the medical necessity criteria or need moderate level TFOC. Youth may be appropriately served with other mental health services such as outpatient therapy.

7. The department intends the rule amendments to be effective January 15, 2011.

/s/ John Koch  
Rule Reviewer

/s/ Anna Whiting Sorrell  
Anna Whiting Sorrell, Director  
Public Health and Human Services

Certified to the Secretary of State January 3, 2011.